MAJORITY RULES PAC

RECEIVED 2013 JUL 19 AM 11: 53 FEC MAIL CENTER

July 18, 2013

Federal Election Commission 999 E St., NW Washington, DC 20463

Re: Form 1, Statement of Organization – Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully Submitted,

Lisa R. Siske

Lisa Lisker Treasurer

13031083317

FEC FORM 1

STATEMENT OF **ORGANIZATION**

2013 JUL 19 AM 11:53

			Off	ice Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Majority Rules PA	4C			
				
ADDRESS (number and street)	PO Box 25046	1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1	
(Check if address	1			······································
is changed)	<u> </u>			1
	Alexandria		VA 223	13
	CITY A		STATE ▲	ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address	llisker@hdafec.com			1
is changed)	Ontional Conned 5 Mail Ad	 		
	Optional Second E-Mail Ad Ijmiller@hdafec.com	aress		1
		<u> </u>	<u></u>	
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)	www.majorityrulespac.com			
·· is changed)				
2. DATE 07 11	3 2013			
3. FEC IDENTIFICATION N	JMBER ▶ C	grandigus gannig major regions promis 		
4. IS THIS STATEMENT		AMENDED (A)		

I certify that I have examined the	is Statement and to the best	t of my knowledge and belief	it is true, correct and	complete.
Type or Print Name of Treasure	r Lisa Lisker			
Type of this traine of from an	. 0			
Signature of Treasurer Lisa I	iske Sun RJ	2	Date 07	18 2013
NOTE: Submission of false, erron		may subject the person signing		penalties of 2 U.S.C. §437g.
Office	ANT CHANGE IN INFORMATI			
Office Use O⊓ly		For further Information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

		rm 1 (Revised 02/2009)
TYPE	OF C	OMMITTEE
Cano		e Committee:
(a)	A Section	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	ж	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name Candi		
Candi Party	date Affiliati	From Vicence or 1
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Candi		
Part	y Con	nmittee:
(d)	1	This committee is a (National, State (Democratic, Parameter of the Republican, etc.)
Polit	ical A	ction Committee (PAC):
(e)	1 to 1	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
		Corporation Wo Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or par committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint	Func	Iraising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)	Er i	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number C
	3.	FEC ID number
	4.	

TEC FOILIT (REVISED OF		rage 3					
Write or Type Committee Name							
Majority Rules PAC							
6. Name of Any Connected Or	rganization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor					
NONE	<u> </u>	<u> </u>					
Mailing Address		111111					
-							
	CITY STATE	ZIP CODE					
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor					
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.							
Lisa Lisker		1					
Full Name	228 S. Washington St., Ste. 115						
	<u> </u>						
	Alexandria VA 22314	· 					
Title or Position	CITY STATE	ZIP CODE					
Treasurer	Telephone number 703 - [549 - 7705					
8. Treasurer : List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the ssistant treasurer).	name and address of					
Full Name Lisa Lisker of Treasurer		1					
	J228 S. Washington St., Ste. 115						
Mailing Address	<u></u>						
	Alexandria VA 22314 CITY STATE	ZIP CODE					
Title or Position Treasurer	Telephone number 703 – [549 - 7705					

FEC Form	1 1 (Revised 02/2009)	Page 4
Full Name of Designated	Julia Miller	
Agent Mailing Address	228 S. Washington St., Ste. 115	
	Alexandria VA 22314 CITY STATE	IP CODE
Title or Position Assistant Treas	urer 703 - 5	7705
Banks or Other safety deposit bo Name of Bank, I	Depositories: List all banks or other depositories in which the committee deposits funds, holds exes or maintains funds. Depository, etc.	accounts, rents
Mailing Address	1909 K St., NW	
	Washington DC 20006	
	CITY STATE	ZIP CODE
Name of Bank, (Depository, etc.	
Mailing Address		
	CITY STATE	ZIP CODE

(7/2013)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered **Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): FED EX **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 7/15/13 DATE PREPARED